

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 694860 (8)  
1. Corporation Name  
CENVILL RECREATION, INC.



Principal Place of Business CENTURY VILL ADMIN BLDG 100 CENTURY BLVD. WEST PALM BEACH FL 33417-2262	Mailing Address CENTURY VILL ADMIN BLDG 100 CENTURY BLVD. WEST PALM BEACH FL 33417-2262
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/16/1981	
21		26		4. FEI Number 59-2107653	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

LEVY, MARK F.  
CENTURY VILLAGE ADMINISTRATION BLDG.  
100 CENTURY BLVD.  
WEST PALM BEACH FL FL 33417

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVY, H. IRWIN	1.2 NAME	
STREET ADDRESS	100 CENTURY BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BCH FL	1.4 CITY - ST - ZIP	
TITLE	DP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVY, MARK F.	2.2 NAME	
STREET ADDRESS	100 CENTURY BLVD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BCH FL	2.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PESECKIS, LYNN L.	3.2 NAME	
STREET ADDRESS	100 CENTURY BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BCH FL	3.4 CITY - ST - ZIP	
TITLE	AT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHAPIRO, STUART	4.2 NAME	
STREET ADDRESS	100 CENTURY BLVD.	4.3 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BCH FL 33417	4.4 CITY - ST - ZIP	
TITLE	AS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREIDMAN, LAURA	5.2 NAME	
STREET ADDRESS	100 CENTURY BLVD.	5.3 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BCH FL 33417	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	KOFFLER, ABBY
STREET ADDRESS		6.3 STREET ADDRESS	100 Century Blvd.
CITY - ST - ZIP		6.4 CITY - ST - ZIP	W. Palm Beach, FL 33417

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  4-6-98 561-640-3131

CR2E034 (10/97)